

Please type a plus sign (+) inside this box -



supplemental priority data sheet PTO /SB/02B attached hereto.

PTO/SB/01 (3pproved for use through 9130/98. OMB 0651-0032

demark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons a valid OMB control number. respond to a collection of information unless it contains

	TION		Atto	rney Docket	Numbe	r 5000	).113A		)	
DECLARA	_		Fi	rst Named Inv	entor/	Slater				
UTILITY O	K DE	SIGN	COMPLETE IF KNOWN							
PATENT AP	PLIC	ATION	Αp	plication Num	ber	10/003	,331			
Declaration	<b>⊠</b> De	Declaration Submitted after Initial Filing	Fil	ing Date		10/31/2001				
Submitted OR with Initial	R — Sul		Gr	oup Art Unit		2815				
Filing	7/110		E>	caminer Name						
My residence, post office  I believe I am the original, names are listed below) of the control of the specification of which is attached heretoon was filed on (MM/I Application Number 10/0 I hereby state that I have namended by any amendm I acknowledge the duty to dis 1.56.	was filed on (MM/DD/YYYY) 10/31/2001 as United States Application Number or PCT International Application Number 10/003,331 and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I hereby claim foreign prior patent or inventor's certifica United States of America, inventor's certificate, or of claimed.	rity benefits uate, or §365 ( listed below any PCT into	under Title 35, Uni a) of any PCT inte and have also ide ernational applicat	ted S rnatic entifie ion h	tates Code §119 ( onal application wh d below, by check aving a filing date	(a)-(d) or lich desig king the b before th	365(b) nated at ox, any at of the	of any foreign least one coun foreign applica application or	applicatio stry other thation for pa n which pr	n(s) for han the atent or iority is	
Prior Foreign Application Number(s)		Country		Foreign Filing D (MM/DD/YYYY		ority Claimed	Certified ( YFS	Copy Atta NO	ched?	
Additional foreign applic	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit	I hereby claim the benefit under Title 35, United States Code § 11 9(e) of any United States provisional application(s) listed below.									
Application Number	(s)	Filing Date	(MN	I/DD/YYYY)			onal provisio ers are listed		ation	

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information O Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## COPY OF PAPERS ORIGINALLY FILED

Please type a plus sign (+) inside this box ~

Under the Paperwork Reduction Act of 1995 opersons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION -Utility or Design Patent Application

I hereby claim the benefit under Title 35. United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is no disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code States Code

which became available between the fil  U.S. Parent Application  Number	iorra	ritational application in the mation which is material to of the prior application an PCT Parent Number		Filing Da DD/YYYY)	te P	Parent Patent Number (if applicable)						
09/787,189			03/15/20	01								
Additional U.S. or PCT international As a named inventor, I hereby appoint the	application number	s are listed on	a suppleme	ntal priority da	ita sheet PTO/	SB/02B attac	bed bereto					
As a named inventor, I hereby appoint the and Trademark Office connected therew	Customer OR	Number	21176	inis application	on and to tran	sact all busin Place Numbe	ness in the Pa Customer er Bar Code					
Name Name	, Re	Registration Number		ame/registration number listed below			Label here Registration					
D1 '11' G		umber		N:	ime		Number					
Philip Summa Richard L. Additon Jesse B. Ashe, III	43	31,573 43,460		Stanley B. Baker Albert P. Allan			35,058 40,485					
	44	44,513		J			45,951					
Additional registered practitioner(s) no	amed on supplemen	tal Registered	Practitioner	Information s	neet PTO/SB/0	2C attached	hereto					
	Justomer Number											
	r Bar Code Label			OR	Corres	pondence	address belo					
Name	21176											
Address	BAYENT A TRADEMARK OFFICE											
Address												
City												
Country	Tolorb		State		ZIP							
nereby declare that all statements made blieved to be true: and further that theso unishable by fine or imprisonment, or bott opardize the validity of the application or	Telepho e herein of my own e statements were r h, under Section 100 any patent issued th	knowledge or	e true and to knowledge of the United	hat all statem that willful fa States Code	Fax ents made on lse statement and that such	information s and the lik willful false s	and belief are e so made are tatements may					
ame of Sole or First Inventor:					filed for this							
Given Name (first and mide	dle [if any])											
	avid B.					Family Name or Surname						
vid B.		- 12	Slater, Jr.			T						
ivid B.	13 170						1 1 1					
ivid B. Iventor's ignature	15 Has	٠.				Date	1					
vid B. iventor's ignature	1: - + 1 de - 1	).				Date	10/13/					
esidence: City Raleigh	State	).	Country	USA		Date Citizenshi	<del></del>					
esidence: City Raleigh	State	).	Country	USA			<del></del>					
esidence: City  Raleigh  ost Office Address  Ost Office Address	State	NC	Country	USA	Country		<del></del>					